

MODEL YEAR 2003 ALTERNATIVE FUEL VEHICLES PURCHASE INFORMATION

*AGENCY NAME: _____

*AGENCY ADDRESS: _____

*AGENCY CONTACT: _____

*PHONE: _____ *FAX: _____ *EMAIL: _____

*FLEET NUMBER: _____
(9 Digit # ; First 2 numbers are Dept. #, next 3 are agency #, last 4 are GFS#)

*VEHICLE TYPE: _____
(example: mid-size sedan)

INFORMATION REQUIRED FOR ALL VEHICLES YOU PLAN TO PURCHASE (CONTRACT AND NON-CONTRACT)

*1. GVWR _____ What is the Gross Vehicle Weight Rating? (for trucks only)
(See contract, previous contract, or contact dealer for this information.)

*2. Parish? _____ In what parish will the vehicle be located?

*3. Will the vehicle be used 75% of the time in EPACT metropolitan area? Yes No

*4. Is this a law enforcement or emergency vehicle? Yes No

*5. Home storage? Yes No

*6. Off-road use. Will vehicle be used 100% of the time off-road? Yes No
(EXAMPLE: Farming, construction)

If you have any questions, please contact Floyd Rector at (225) 342-6852 or by e-mail frector@doa.state.la.us.

Please submit this information to LPAA, attention Floyd Rector, for each vehicle you plan to purchase for model year 2003. When LPAA returns this form to you, it must be submitted to the Office of State Purchasing and denoted with your order or requisition number before your vehicle order will be processed. This form may be accessed, completed and submitted electronically to LPAA from OSP's website, www.state.la.us/osp, under "Online Forms" – or by fax to (225) 342-6891, or by mail.

Order / Requisition No. _____

AFV Form #1
(Rev. 10/09/02)

FOR LPAA & STATE PURCHASING USE ONLY

Excluded From EPACT _____

Excluded From EPACT, however, LPAA recommends AFV _____

Alternative Fuel Vehicle _____

Signature: _____ Date: _____